

Life Forms Quick Reference Guide				
Form Number	Title	Revision Date	Manual Ref	Internet
	Renewal Census – Local Government Employers		1300	
	Renewal Census – State Employers		1301	
ET-1107	<i>How to Become a Participating Employer Under the Wisconsin Public Employers' Group Life Insurance Program</i>	3/2001		Yes
ET-1117	<i>Group Life Insurance Administration Manual</i>	11/2001		Yes
ET-1301	<i>Employer Resolution to Pay Entire Premium For:</i>	4/1999	909	Yes
ET-1303	<i>A Resolution for Inclusion Under Group Life Insurance Resolution to Provide 50% Post-Age 65 Coverage for Eligible Employees</i>	4/1999	907	Yes
ET-1307	<i>Resolution to Withdraw from the Wisconsin Public Employers' Group Life Insurance Program(s)</i>	4/2001	1703	
ET-1610	<i>Group Life Insurance Collection Report</i>	4/2001	1002	Yes
ET-1715	<i>WRS Previous Service Checks</i>	1/2000	403	Yes
ET-2101	<i>The Wisconsin Public Employers Group Life Insurance Program Life Insurance Brochure</i>	1/2001 (Web) 1/1998	201	Yes ee *
ET-2154	<i>Continuation Application</i>	7/1997	1610	
ET-2304	<i>Life Insurance Application/Cancellation/Refusal</i>	11/2001	603	
ET-2305	<i>Evidence of Insurability Application</i>	10/2001	702	Yes
ET-2306	<i>Information/Application for Converting Group Life Insurance</i>	10/1998	1612	Yes ee
ET-2309	<i>Election to Reduce Amount of Life Insurance</i>	10/1998	805	
ET-2322	<i>Application for Living Benefits</i>	8/2001		
ET-2323	<i>Living Benefit Life Insurance Summary</i>	8/2001		
ET-2325	<i>Converting Your Group Life Insurance to Pay Health or Long-Term Care Insurance Premiums</i>	8/2000	1508	Yes ee
ET-2327	<i>Living Benefits Brochure</i>	8/2001	1507	Yes ee *
ET-2347	<i>Beneficiary Designation</i>	6/1999		Yes ee
ET-2351	<i>Notification of Underwriting Decision (Evidence Approval, Denial, etc.)</i>	4/2000	703	
ET-4104	<i>Group Life Insurance After You Terminate Employment</i>	1/2001 (Web) 10/2000		Yes ee
ET-5306	<i>Request for Disability Premium Waiver</i>	4/2000	1405	Yes
ET-6301	<i>Notice of Death</i>	10/1998	1501	
ET-6302	<i>Accidental Dismemberment of Loss of Use of Limbs or Eyes</i>	6/1997	1506	
ET-6303	<i>Notice of Death for Spouse or Dependent Child</i>	10/1998	1504	Yes

* ee indicates information may be found under the employee or benefit program information on the Internet.

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